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ABSTRACT

This position paper addresses the creation of a new category of eligibility for services under the Individuals with Disabilities Education Act, "Developmental Delay," which would only be applicable to children ages 3 to 5. Such a classification would address concerns about labeling young children, lack of confidence in assessment procedures for children this age, and the reluctance of many states to use eligibility categories other than those explicitly identified in the federal legislation. This paper discusses the impact of such a change on the number of children served (no differences were found between states using categorical versus noncategorical approaches to handicap identification). It offers guidelines for defining developmental delay including documentation of delayed development by use of standard deviations on standardized developmental assessment instruments supported by additional documentation by qualified professionals as well as use of nondiscriminatory procedures. It addresses concerns about the transition from the "developmentally delayed" category to categorical eligibility at the age of 6. (14 references) (DB)

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Developmental Delay: Establishing Parameters For A Preschool Category of Exceptionality

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The Statement to the U.S. Senate Subcommittee on Disability Policy of The International Division for Early Childhood of the Council for Exceptional Children with respect to reauthorization of Part H and Amendments to Part B of the Individuals with Disabilities Education Act (IDEA) contained the recommendation that Congress add a new category to the list of eligibility categories under Part B (DEC, 1991). DEC recommended that this category, "developmental delay", be added with language which would clarify that: l) this category would be used at a state's discretion and could be used in addition to the Part B disability categories, 2) that it be for three through five year old children only and, 3) that it not be assumed that a state must develop the same eligibility criteria for "developmental delay" for three through five year olds that may be in place for birth through two year olds. The purpose of this paper is to provide suggested guidelines for states for the development and implementation of the developmental delay category.

As services to preschool children with disabilities have been implemented in the states both prior to and subsequent to PL 99-457, a wide range of eligibility criteria have developed, Concern for the potentially harmful effects of labeling a child at the early age of three, four or five years, coupled with a lack of confidence in assessment procedures for young children and the lack of a good fit between P.L. 94-142 categories and young children, has resulted in the emergence of non-categorical eligibility options in many states (Harbin, Danaher, Bailer & Eller, 1991; Strickland & Turnbull, 1990). Ironically, with the passage of PL 99-457 and its requirement that states apply Part B provisions to preschool children by 1991, states have become reluctant to use eligibility categories other than the categories identified in Part B for fear of being found out of compliance. A solution to this dilemma is the addition of a special eligibility option specific to children aged three through five years.

It is appropriate that such a special eligibility option for preschoolers be stated in terms of "developmental" rather than "educational" performance. Existing categorical definitions under Part B include three criteria for eligibility: (l) documentation of the presence of a disability, (2) which adversely affects a child's educational performance, and (3) requires special instruction - i.e. special education. These criteria pose unique problems in determining the eligibility of preschool children. The difficulties inherent in assessment of young children make the specification of some handicapping conditions (mental retardation, specific learning disabilities and emotional distrubance, for example) very difficult to document with confidence. Similarly, the adverse effect of a disability on educational performance cannot be documented for preschoolers who have no prior educational experience. No existing status of educational performance is typically available for preschool children. What is available is developmental status. It is recommended, therefore, that the special eligibility category for preschool children encompass the designation of developmental delay.

Impact on Number of Children Served

Developmental delay refers to a condition which represents a significant delay in the process of development. It does not refer to a condition in which a child is slightly or momentarily lagging in development. The presence of developmental delay is an indication that the process of development is significantly effected and that without special intervention, it is likely that educational performance at school age will be effected.

Concern has been expressed that adding a "non-categorical" option would greatly increase the number of children eligible for preschool special education services. However, available data on the percentage of preschool children being served in states using a non-categorical system does not support this concern. Smith and Schakel (1986) reported data from 1980 which found that the percentage of preschool children identified as having disabilities in states using a non-categorical

procedure did not differ appreciably from states using a categorical system. An analysis of data included in the Office of Special Education Program's 1991 Report to Congress resulted in a similar conclusion. According to a recent survey by the Carolina Policy Studies Project (Harbin, Danaher, Bailer & Eller, 1991) six states report using a totally non-categorical system for preschool eligibility, twenty states follow the Part B categorical system, and twenty-five use a combination of categorical and non-categorical procedures. A review of the percentage of children from three through five years of age identified as having disabilities in the 1991 Report to Congress shows that many of the states using a non-categorical system have percentages that are well below states using a categorical system. The average percentage for all 50 states plus the District of Columbia and Puerto Rico was 3.48 percent: Missouri, which is non-categorical, served only 1.78 percent; Georgia, which utilizes a combination of categorical and noncategorical served 2.62 percent. The range of percentages for "noncategorical" states was 1.78 - 5.32 percent; for states using a combination of categorical and noncategorical options the range was 1.45 - 6.44 percent; for states using a categorical system only, the range was 1.70 - 5.10 percent. *Clearly, whether a categorical or non-categorical system is used is not what determines the percent of children served.* Many other variables, such as child find efforts, the criteria for eligibility (1.5 vs 2.0 standard deviations below the mean) and methods of assessment, enter into the determination of the numbers of children who are identified as eligible.

Defining Developmental Delay

In establishing a developmental delay category, states are faced with many decisions to be made relative to defining and implementing this preschool option. "Developmental delay" has frequently been defined as:

> a delay in one or more of the following:
> - cognitive development,
> - physical development (which includes fine motor and gross motor),
> - communication development,
> - social/emotional development, or
> - adaptive development (Harbin, Danaher, Bailer & Eller, 1991).

It is recommended that the determination of developmental delay be accomplished through consideration by the assessment team of the following:

- performance on a standardized developmental assessment instrument AND
- documentation of delayed or atypical development in one of the above developmental areas by a qualified professional through:
  - use of a domain specific assessment,or
  - diagnosis of delayed or atypical development through observation.

Performance on a standardized developmental assessment instrument: The criteria for determining a delay according to a developmental assessment has varied among the states and has frequently been identified in terms of standard deviations below the mean, percentage of delay in months or even a specified number of months of delay (Harbin, Danaher, Bailer & Eller, 1991). It is recommended that documentation of delayed development by test performance be identified in standard deviations rather than in percentage or months of delay.

Many of the instruments used in early intervention programs cannot demonstrate adequate reliability or test validity and have not undergone the evaluation procedures required to be psychometrically sound (Bailey & Wolery, 1989). Many of these instruments allow the generation of a developmental index or age equivalent score without standardization procedures or with inadequate representation. Restriction of the criteria to a standard deviation unit or measure of delay will encourage the use of more psychometrically sound tools.

It has been typical for states to specify the delay in standard deviations to be either 1.5 SD or 2.0 SD, below the mean. If development in the domains assessed is assumed to be normally distributed, approximately 7% of the population would be at or below 1.5 SD below the mean, while approximately 3% would be at or below 2.0 SD below the mean. Some states have identified eligibility as 2.0 SD below the mean in one area of development or 1.5 SD below the mean in two areas.

Documentation of delayed or atypical development by qualified professionals: The use of reliable and valid metrics must be accompanied by a multiple measure, multi-disciplinary, and ecologically sound assessment approach. Standardized assessments should not be the only evaluation tools considered but should function in tandem with other tools such as criterion referenced instruments, child observation and information from family members. These tools, when used by a professional with experience in working with the preschool population, will provide valuable information for eligibility decisions.

Professionals should be allowed the flexibility to make appropriate eligibility decisions guided by informed clinical judgement so that test performance does not become the only criterion. Norm-referenced instruments are designed to reflect normal development - the purpose of testing is to determine the extent of deviation from that norm. Children with disabilities are seldom included in the normative group, yet the absence of these children from the normative group may in fact lead to a discriminatory testing procedure. Good clinicians possess the knowledge and capability to discriminate between biased outcomes and appropriate reflections of child ability and skill status. Informed clinical judgement is necessary to ensure appropriate determination of eligibility.

Obtaining information from families is also an important assessment tool. Parents and other family members may have information about the developmental progress of a child that would not be readily obtained from other assessment instruments or from direct observation by a professional (Cunningham & Davis, 1985). Families have not only observed the child's development over a considerable period of time, but can relate descriptions of the child's typical behavior in home and community environments that may be difficult for the assessment team to access. Families also can validate, confirm or modify the information obtained by professionals during the assessment process. Clearly, families are sources of important information, not just receivers of information. Involving families in the assessment process can also serve to increase parent/professional collaboration (Bailey, 1989). A study by Brinckerhoff and Vincent (1986) found that procedures for involving families in the assessment process from the very beginning had the effect of increasing family participation and contributions throughout the IEP process.

Nondiscriminatory Procedures: Nondiscriminatory assessment, evaluation and accompanying procedural safeguards are necessary components of preschool services and must be followed for the population of preschool children. The regulations governing Part B of IDEA require that tests and other evaluation materials:

- must be selected and administered so as not to be racially or culturally discriminatory;
- are provided and administered in the child's native language or other mode of communication;
- have been validated for the specific purpose for which they are used;
- are administered by trained personnel in conformance with the instructions provided by their producer;

- include those tailored to assess specific areas of educational/developmental needs and not merely those which are designed to provide a single general intelligence quotient;
- are selected and administered to best ensure that when administered to a child with impaired sensory, manual, or speaking skills, the test results accurately reflect the child's developmental level or whatever other factors the test purports to measure, rather than reflecting the child's impaired sensory, manual, or speaking skills (except where those skills are the factors which are intended to be measured) (34 CFR Section 300.530 300.532).

No single procedure may be used as the sole criterion for determining an appropriate intervention program for a child. The evaluation must be made by a multidisciplinary team or group of persons, including at least one teacher or other specialist with knowledge in the area of suspected disability. Also, the child must be assessed in all areas related to the suspected disability, including, where appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communication status, and motor abilities (34 CFR & Section 300.532).

The Transition from "Developmentally Delayed" to Categorical Eligibility

Concerns have been expressed about anticipated difficulties involved in the transition of children considered eligible for special education services under the category "developmental delay" to services under the Part B categories. In particular, the following questions have been raised:

1. Will children eligible for services as "developmentally delayed" continue to be eligible for services at age six and will it be possible to classify them under the Part B categories?
2. What will be the impact on parents of a change to a "categorical" label when the child turns six?

There are no published data yet to help answer these questions; however, many early childhood educators and other multidisciplinary team members have addressed these issues in states where non-categorical eligibility options currently exist. Clearly, there are some categories of handicapping conditions that are relatively easy to identify and for which relatively concrete and objective criteria exist at all ages. The expressed concerns about transition to categorical labels at age six usually center on the less readily identifiable categories of Mental Retardation, Specific Learning Disabilities, and Emotional Disturbance. By age six, however, with data documenting a child's functioning and progress in an "educational" setting, it is no more difficult (and perhaps less difficult because of the accumulated knowledge of the child's individual strengths and needs) to assign these categorical labels than it is to categorize a newly identified primary-aged child.

It is expected that there will be children who are eligible at three, four or five years of age who are no longer eligible when they turn six. If school personnel identify children as "developmentally delayed" at four who are no longer eligible for services as they approach their sixth birthday, it is not cause for concern about the adequacy of the "developmentally delayed" designation, but cause for celebration of successful intervention which has tempered the effects of the child's early problems (Fowler, Haines & Rosenkoetter, 1990). A number of studies show that a notable percentage of recent "graduates" of early childhood special education programs go on to regular education without the need for special education services (Edgar, McNulty, Gaetz, & Maddox, 1984; Edgar, Heggelund, & Fischer, 1988; Hume & Dannenbring, 1989; Thurlow, Ysseldyke, & Weiss, 1988) even in districts with categorical identification systems for preschoolers.

Concerns about parent reaction to the application of a categorical label after having their children called "developmentally delayed" are real. There has been frequent debate and concern about the practice of labeling in special education,

with certain labels causing more anxiety for parents than others. Under the current system in most states, however, categorical labels are required at age six. In order to prepare parents for the change that will come, it is important for them to know at the outset that "developmental delay" is a temporary category and that at age six, a new category will be applied if the child continues to need services. It is often appropriate to voice and explore the various possibilities at this time. While assignment of a new label at age six may still be a difficult process for parents and early childhood special educators, they will have had time to arrive at a better understanding of the child's needs and will have had time to prepare for the change.

Summary

During the development of P.L. 99-457, early intervention professionals and parents convinced Congress of the inappropriateness of Part B categories for many preschool children with disabilities. The Senate version of P.L. 99-457, in fact, created a new Part B category of "developmental delay". However, the final bill addressed this issue only by amending the child count requirements. Thus, in 1986, Congress acknowledged the problem but did not effectively remedy the situation. Adding developmental delay as an option for preschool children does address the problem. However, states must develop definitions of developmental delay thoughtfully so that the outcome will be eligibility procedures which are based on knowledge of young children and which will ensure appropriate intervention services for young children.

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